

Fill in this information to identify your case:

United States Bankruptcy Court for the:
NORTHERN DISTRICT OF OKLAHOMA

Case number (if known): _____ Chapter you are filing under:

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if

a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the

spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for

Part 1: Identify Yourself

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture

About Debtor 1:

Isaias

First Name

Morales

Middle Name

Torres

Last Name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

Maria

First Name

Ann

Middle Name

Torres

Last Name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First Name

Middle Name

Last Name

First Name

Middle Name

Last Name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 9 2 2 7

OR

9xx - xx - _____

xxx - xx - 9 1 5 4

OR

9xx - xx - _____

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as

☒ I have not used any business names or EINs.

☒ I have not used any business names or EINs.

Business name _____

Business name _____

Business name _____

Business name _____

Business name _____

Business name _____

EIN _____

EIN _____

EIN _____

EIN _____

5. Where you live

4024 S. 132nd E Ave

Number Street

Number Street

Tulsa

City

OK

State

74134

ZIP Code

City

State

ZIP Code

Tulsa

County

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

Number Street

P.O. Box

P.O. Box

City

State

ZIP Code

City

State

ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

8. How you will pay the fee

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived.** You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the

9. Have you filed for bankruptcy within the last 8 years?

- ☒ No
- ☐ Yes.
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- ☒ No
- ☐ Yes.
- Debtor _____ Relationship to you _____
- District _____ When _____ Case number, _____
MM / DD / YYYY if known
- Debtor _____ Relationship to you _____
- District _____ When _____ Case number, _____
MM / DD / YYYY if known

11. Do you rent your residence?

- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A)

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

- 12. Are you a sole proprietor of any full- or part-time business?**

- ☒ No. Go to Part 4.
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

Name of business, if any _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

- 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- ☒ No. I am not filing under Chapter 11.
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

- 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs**

- ☒ No
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

Where is the property?

Number _____ Street _____

City _____

State _____

ZIP Code _____

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose

About Debtor 1:

You must check one:

☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency,

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency,

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes**16.** What kind of debts do you have?**16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."☐ No. Go to line 16b.☒ Yes. Go to line 17.**16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.☐ No. Go to line 16c.☐ Yes. Go to line 17.**16c.** State the type of debts you owe that are not consumer or business debts.
_____**17.** Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

☐ No. I am not filing under Chapter 7. Go to line 18.☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?☒ No☐ Yes**18.** How many creditors do you estimate that you owe?☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5,001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**19.** How much do you estimate your assets to be worth?☐ \$0-\$50,000☐ \$50,001-\$100,000☒ \$100,001-\$500,000☐ \$500,001-\$1 million☐ \$1,000,001-\$10 million☐ \$10,000,001-\$50 million☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million☐ \$500,000,001-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion**20.** How much do you estimate your liabilities to be?☐ \$0-\$50,000☐ \$50,001-\$100,000☒ \$100,001-\$500,000☐ \$500,001-\$1 million☐ \$1,000,001-\$10 million☐ \$10,000,001-\$50 million☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million☐ \$500,000,001-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this

X /s/ Isaias Morales Torres _____

Isaias Morales Torres, Debtor 1

Executed on **04/09/2019**

MM / DD / YYYY

X /s/ Maria Ann Torres _____

Maria Ann Torres, Debtor 2

Executed on **04/09/2019**

MM / DD / YYYY

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to

X /s/ Charles J. Kania _____

Signature of Attorney for Debtor

Date **04/09/2019**

MM / DD / YYYY

Charles J. Kania _____

Printed name

Charles J. Kania & Associates, P.C. _____

Firm Name

5319 South Lewis _____

Number Street

Suite 120 _____

Tulsa, OK 74105 _____

City

State

ZIP Code

Contact phone **(918) 743-2239** _____

Email address **charles@kanialaw.com** _____

20512 _____

Bar number

State

Fill in this information to identify your case and this filing:

| | | | |
|---|--|--|---|
| Debtor 1 | Isaias <small>First Name</small> | Morales <small>Middle Name</small> | Torres <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Maria <small>First Name</small> | Ann <small>Middle Name</small> | Torres <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1.

Street address, if available, or other description

4024 S. 132nd E Ave OK 74134
City State ZIP Code

County

4024 S. 132nd E Ave Tulsa, Oklahoma

What is the property?

Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

4024 S. 132nd E Ave Tulsa, Oklahoma 74134 legally described as Lot Eight (8), Block Ten (10), Park Plaza East III, an Addition in Tulsa County, State of Oklahoma, according to the Recorded Plat thereof.

Do not deduct secured claims or exemptions. Put the amount of any secured claims in **Schedule D: Creditors Who Have Claims Secured by Property.**

| | |
|--|--|
| Current value of the entire property? | Current value of the portion you own? |
| \$129,839.00 | \$129,839.00 |

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

\$129,839.00

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known)

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? **Yes** **Schedule G: Executory Contracts and Unexpired Leases.**
 you own that someone else drives. If you lease a vehicle, also report it.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1. **Who has an interest in the property?** Do not deduct secured claims or exemptions. Put the amount of any secured claims in **Schedule D: Creditors Who Have Claims Secured by Property.**
 Make: **Chevrolet** Check one.
 Model: **Silverado** ☐ Debtor 1 only
 Year: **2018** ☐ Debtor 2 only
 Approximate mileage: **10,000** ☒ Debtor 1 and Debtor 2 only
 Other information: **2018 Chevrolet Silverado (approx. 10,000 miles) VIN** ☐ At least one of the debtors and another **Current value of the entire property?** **\$35,000.00** **Current value of the portion you own?** **\$35,000.00**
☐ Check if this is community property (see instructions)

3.2. **Who has an interest in the property?** Do not deduct secured claims or exemptions. Put the amount of any secured claims in **Schedule D: Creditors Who Have Claims Secured by Property.**
 Make: **Chevrolet** Check one.
 Model: **Malibu** ☐ Debtor 1 only
 Year: **2010** ☐ Debtor 2 only
 Approximate mileage: **140,000** ☒ Debtor 1 and Debtor 2 only
 Other information: **2010 Chevrolet Malibu (approx. 140,000 miles) VIN** ☐ At least one of the debtors and another **Current value of the entire property?** **\$4,000.00** **Current value of the portion you own?** **\$4,000.00**
☐ Check if this is community property (see instructions)

3.3. **Who has an interest in the property?** Do not deduct secured claims or exemptions. Put the amount of any secured claims in **Schedule D: Creditors Who Have Claims Secured by Property.**
 Make: **Nissan** Check one.
 Model: **Versa** ☐ Debtor 1 only
 Year: **2015** ☐ Debtor 2 only
 Approximate mileage: **88,000** ☒ Debtor 1 and Debtor 2 only
 Other information: **2015 Nissan Versa (approx. 88,000 miles) VIN 3N1CE2CP7FL382688** ☐ At least one of the debtors and another **Current value of the entire property?** **\$10,000.00** **Current value of the portion you own?** **\$10,000.00**
☐ Check if this is community property (see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... →

\$49,000.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

6. Household goods and furnishings*Examples:*Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe See continuation page(s).\$1,500.00**7. Electronics***Examples:*Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☒ No☐ Yes. Describe _____**8. Collectibles of value***Examples:*Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe _____**9. Equipment for sports and hobbies***Examples:*Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe _____**10. Firearms***Examples:*Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe _____**11. Clothes***Examples:*Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe _____\$750.00**12. Jewelry***Examples:*Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☒ No☐ Yes. Describe _____**13. Non-farm animals***Examples:*Dogs, cats, birds, horses☒ No☐ Yes. Describe _____**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information..... _____**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here..... →**\$2,250.00**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☐ No☒ Yes Cash: **\$125.00****17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes Institution name:17.1. Checking account: **IBC Bank Checking account No. 1605859400** **\$3.69****18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes Institution or issuer name:**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☒ No☐ Yes. Give specific information about them Name of entity: % of ownership:**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific information about them Issuer name:**21. Retirement or pension accounts***Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☒ No☐ Yes. List each account separately. Type of account: Institution name:**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes Institution name or individual:**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes Issuer name and description:**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☒ No☐ Yes. Give specific information about them _____

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☒ No☐ Yes. Give specific
information about them _____**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☒ No☐ Yes. Give specific
information about them _____**Money or property owed to you?****Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information
about them, including whether
you already filed the returns
and the tax years.....

Federal: _____

State: _____

Local: _____

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information _____**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☒ No☐ Yes. Name the insurance
company of each poli
and list its value.....

Company name: _____

Beneficiary: _____

Surrender or refund value: _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No☐ Yes. Give specific information _____**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim _____

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims☒ No☐ Yes. Describe each claim _____**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information _____**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... →****\$128.69****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.**Current value of the portion you own?**
Do not deduct secured claims or exemptions.**38. Accounts receivable or commissions you already earned**☒ No☐ Yes. Describe _____**39. Office equipment, furnishings, and supplies***Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices☒ No☐ Yes. Describe _____**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe _____**41. Inventory**☒ No☐ Yes. Describe _____**42. Interests in partnerships or joint ventures**☒ No☐ Yes. Describe Name of entity: _____

% of ownership: _____

43. Customer lists, mailing lists, or other compilations☒ No☐ Yes. Do your lists include personally identifiable information as defined in 11 U.S.C. § 101(41A)?☐ No☐ Yes. Describe _____**44. Any business-related property you did not already list**☒ No☐ Yes. Give specific information.**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →****\$0.00**

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

47. Farm animals*Examples:* Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes..

48. Crops--either growing or harvested

- ☒ No
☐ Yes. Give specific
information.....

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
☐ Yes..

50. Farm and fishing supplies, chemicals, and feed

- ☒ No
☐ Yes..

51. Any farm- and commercial fishing-related property you did not already list

- ☒ No
☐ Yes. Give specific
information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →**\$0.00****Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?***Examples:* Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... →**\$0.00**

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 8: List the Totals of Each Part of this Form

| | | |
|---|---|--|
| 55. Part 1: Total real estate, line 2..... | → | <u>\$129,839.00</u> |
| 56. Part 2: Total vehicles, line 5 | <u>\$49,000.00</u> | |
| 57. Part 3: Total personal and household items, line 15 | <u>\$2,250.00</u> | |
| 58. Part 4: Total financial assets, line 36 | <u>\$128.69</u> | |
| 59. Part 5: Total business-related property, line 45 | <u>\$0.00</u> | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | <u>\$0.00</u> | |
| 61. Part 7: Total other property not listed, line 54 | <u>+ \$0.00</u> | |
| 62. Total personal property. Add lines 56 through 61..... | <div style="border: 1px solid black; padding: 2px; display: inline-block;"><u>\$51,378.69</u></div> | Copy personal property total → + <u>\$51,378.69</u> |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62..... | | <div style="border: 2px solid black; padding: 2px; display: inline-block;"><u>\$181,217.69</u></div> |

Debtor 1

Isaias Morales Torres
Maria Ann Torres

Case number (if known)

6. Household goods and furnishings (details):

| | |
|----------------------------------|------------|
| Household goods and furnishings. | \$1,500.00 |
| Misc. Furniture | \$0.00 |
| | \$0.00 |

Fill in this information to identify your case:

| | | | |
|---|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaias First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number _____ (if known) | | | |

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Additional Pages* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so

is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--------------------------------------|-----------------------------------|------------------------------------|
|---|--------------------------------------|-----------------------------------|------------------------------------|

Copy the value from Schedule A/B ☐ Check only one box for

Brief description:
 4024 S. 132nd E Ave Tulsa, Oklahoma
 74134
 4024 S. 132nd E Ave Tulsa, Oklahoma
 74134 legally described as Lot Eight (8),
 Block Ten (10), Park Plaza East III, an
 Addition in Tulsa County, State of
 Oklahoma, according to the Recorded Plat

\$129,839.00

☐
☒ 100% of fair market value, up to any

Line from Schedule A/B: 1.1

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property

Current value of
the portion you
own

Amount of the
exemption you claim

Specific laws that allow exemption

Copy the value from
Schedule A/B

Check only one box
for

Brief description:
Household goods and furnishings.

Line from Schedule A/B: 6

\$1,500.00

☒
☐

\$0.00

100% of fair
market
value, up to any

Okla. Stat. tit. 31 § 1(A)(3)

Brief description:
Misc. Furniture

Line from Schedule A/B: 6

\$0.00

☒
☐

\$0.00

100% of fair
market
value, up to any

Okla. Stat. tit. 31 § 1(A)(3)

Brief description:
Household Furniture

Line from Schedule A/B: 6

\$0.00

☒
☐

\$0.00

100% of fair
market
value, up to any

Okla. Stat. tit. 31 § 1(A)(3)

Brief description:
Clothing for 2 adults and 1 child.

Line from Schedule A/B: 11

\$750.00

☒
☐

\$750.00

100% of fair
market
value, up to any

Okla. Stat. tit. 31 § 1(A)(7)

Brief description:
Cash on hand

Line from Schedule A/B: 16

\$125.00

☐
☒

100% of fair
market
value, up to any

Brief description:
IBC Bank Checking account No.

Line from Schedule A/B: 17.1

\$3.69

☐
☒

100% of fair
market
value, up to any

Fill in this information to identify your case:

| | | | |
|---|--|--|---|
| Debtor 1 | Isaias <small>First Name</small> | Morales <small>Middle Name</small> | Torres <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Maria <small>First Name</small> | Ann <small>Middle Name</small> | Torres <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in

| Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|--|--|---|
| \$8,663.00 | \$10,000.00 | |

2.1

American Credit Accept

Creditor's name

961 E Main St

Number Street

Describe the property that secures the claim:

2015 Nissan Versa (approx.
88,000 miles) VIN 3N1CE

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Automobile

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred **08/2016**Last 4 digits of account number **1 0 0 1**

Current Account

FIXED RATE

Add the dollar value of your entries in Column A on this page. Write that number here:

\$8,663.00

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any**2.2****Describe the property that secures the claim:****\$1,754.00****\$0.00****\$1,754.00****Conns**

Creditor's name

Attn: Bankruptcy Department

Number Street

PO Box 815867

Misc. Furniture

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Secured

Dallas**TX****75234**

City

State

ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Date debt was incurred **07/2017**Last 4 digits of account number **7 1 3 1****2.3****Describe the property that secures the claim:****\$6,163.00****\$0.00****\$6,163.00****Conns**

Creditor's name

Attn: Bankruptcy Department

Number Street

PO Box 815867

Household Furniture

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Secured

Dallas**TX****75234**

City

State

ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Date debt was incurred **06/2017**Last 4 digits of account number **7 1 3 0**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$7,917.00

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any**2.4****Conns**

Creditor's name

Attn: Bankruptcy Department

Number Street

PO Box 815867**Dallas**

City

TX

State

75234

ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debtDate debt was incurred **06/2017****Describe the property that secures the claim:**

Household goods and furnishings.

\$2,783.00**\$1,500.00****\$1,283.00****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Secured

Last 4 digits of account number **8 6 3 0****2.5****Ocwen Loan Servicing**

Creditor's name

Attn: Research/Bankruptcy

Number Street

1661 Worthington Rd Ste 100**West Palm Beach FL**

City

33409

State

ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debtDate debt was incurred **03/2004****Describe the property that secures the claim:**

4024 S. 132nd E Ave Tulsa,

Oklahoma 74134

\$105,303.00**\$129,839.00****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Conventional Real Estate Mortgage

Last 4 digits of account number **8 9 1 2**

PAYING UNDER A PARTIAL PAYMENT AGREEMENT

Add the dollar value of your entries in Column A on this page. Write that number here:

\$108,086.00

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any**2.6****Saber Acceptance**

Creditor's name

Attn: Bankruptcy Department

Number Street

PO Box 471823**Tulsa**

City

OK 74147

State ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt**Describe the property that secures the claim:**

2010 Chevrolet Malibu

(approx. 140,000 miles) VIN

\$3,018.00**\$4,000.00****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Automobile

Date debt was incurred **08/27/2016****Last 4 digits of account number** **1 8 2 2**

Current Account

2.7**Santander Consumer USA**

Creditor's name

Attn: Bankruptcy

Number Street

PO Box 961245**Fort Worth**

City

TX 76161

State ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt**Describe the property that secures the claim:**

2018 Chevrolet Silverado

(approx. 10,000 miles)

\$35,592.00**\$35,000.00****\$592.00****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Automobile

Date debt was incurred **09/2018****Last 4 digits of account number** **1 0 0 0**

Current Account

Add the dollar value of your entries in Column A on this page. Write that number here:

\$38,610.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$163,276.00

Fill in this information to identify your case:

Debtor 1 **Isaias** **Morales** **Torres**
First Name Middle Name Last Name

Debtor 2 **Maria** **Ann** **Torres**
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the **NORTHERN DISTRICT OF OKLAHOMA**

Case number _____
 (if known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed on *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☒ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| Total claim | Priority amount | Nonpriority amount |
|-------------|-----------------|--------------------|
|-------------|-----------------|--------------------|

2.1

Priority Creditor's Name _____

Last 4 digits of account number _____

Number _____ Street _____

When was the debt incurred? _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

☐ Check if this claim is for a community debt
 Is the claim subject to offset?

- ☐ No
☐ Yes

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim,

Total claim**\$301.00****4.1****Cap1/Justice**

Nonpriority Creditor's Name

Capital One Retail Svcs/Attn: Bankruptcy

Number Street

PO Box 30258**Salt Lake City****UT****84130**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number 8 4 6 8**When was the debt incurred?** 07/2018**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Charge Account

4.2**Capital One**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 30285**Salt Lake City****UT****84130**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number 8 8 7 9**When was the debt incurred?** 01/2016**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Credit Card

\$443.00

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3

\$410.00

Comenity Bank/Victoria Secret

Nonpriority Creditor's Name

Attn: Bankruptcy

Number

Street

PO Box 182125

Columbus

OH

43218

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 8 8 6 1

When was the debt incurred? 07/2015

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Charge Account

4.4

\$302.00

Comenitycapital/ffFe21

Nonpriority Creditor's Name

Attn: Bankruptcy Dept

Number

Street

PO Box 182125

Columbus

OH

43218

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 9 3 5

When was the debt incurred? 06/2018

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Charge Account

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.5****\$150.00****Convergent Outsourcing, Inc.**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 9004**Renton**

City

WA

State

98057

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Original Creditor Name: COX COMMUNICATIONS

Last 4 digits of account number **3 2 1 1**When was the debt incurred? **05/2017**As of the date you file, the claim is ☐ Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Collection Attorney

4.6**\$150.04****Convergent Outsourcing, Inc.**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 9004**Renton**

City

WA

State

98057

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **3 2 1 1**

When was the debt incurred?

As of the date you file, the claim is ☐ Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Unsecured

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.7****\$16,664.00****Deville Mgmt**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 1987**Colleyville****TX****76034**

City

State

ZIP Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Original Creditor Name: DRIVETIME

Last 4 digits of account number **7 9 N 1**When was the debt incurred? **12/14/2017**As of the date you file, the claim is ☐ Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify
Unknown Loan Type**4.8****\$18,387.00****Ditech**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 6172**Rapid City****SD****57709**

City

State

ZIP Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Charge Off for \$18387 on 09/14

Last 4 digits of account number **7 6 0 3**When was the debt incurred? **03/2004**As of the date you file, the claim is ☐ Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify
Real Estate Mortgage without Other Collateral

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.9****\$896.40****Escalate, LLC**

Nonpriority Creditor's Name

PO Box 645425

Number Street

Cincinnati**OH****45264**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 1 2 7

When was the debt incurred? _____

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Unsecured

4.10**\$562.59****First National Collection Bureau, Inc.**

Nonpriority Creditor's Name

610 Waltham Way

Number Street

Sparks**NV****89434**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 5 4 9 6

When was the debt incurred? _____

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Unsecured

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.11****\$1,893.00****GC Services Limited Partnership**

Nonpriority Creditor's Name

PO Box 1022

Number Street

Wixom**MI****48393**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 6 6 1 4**When was the debt incurred?** _____**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Collecting for -

4.12**\$772.27****MARS**

Nonpriority Creditor's Name

PO Box 170910

Number Street

Tulsa**OK****74147**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 1 0 5**When was the debt incurred?** _____**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Unsecured

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.13****\$760.00****Midland Funding**

Nonpriority Creditor's Name

2365 Northside Dr Ste 300

Number Street

San Diego**CA****92108**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Original Creditor Name: CREDIT ONE BANK N.A.

Last 4 digits of account number **5 3 8 8**When was the debt incurred? **07/2017**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Factoring Company Account

4.14**\$649.47****Progressive Leasing**

Nonpriority Creditor's Name

256 Data Dr.

Number Street

Draper**UT****84020**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0 7 9 0**

When was the debt incurred?

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Unsecured

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.15****\$2,581.75****Progressive Leasing**

Nonpriority Creditor's Name

256 Data Dr.

Number Street

Draper**UT****84020**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5 0 1 0**

When was the debt incurred? _____

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Unsecured

4.16**\$86.50****Radiology Consultants of Tulsa**

Nonpriority Creditor's Name

P.O. Box 4975

Number Street

Tulsa**OK****74159**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **7 0 0 8**

When was the debt incurred? _____

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Unsecured

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.17****\$7,922.00****Saber Acceptance**

Nonpriority Creditor's Name

Attn: Bankruptcy Department

Number Street

PO Box 471823**Tulsa****OK****74147**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Current Account

Last 4 digits of account number **4 2 5 J**When was the debt incurred? **11/05/2016**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Automobile - Repo'd**

4.18**\$3,529.50****Saint Francis Health System**

Nonpriority Creditor's Name

6600 S. Yale Ave.

Number Street

Suite 1400**Tulsa****OK****74136**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1 4 5 8**

When was the debt incurred?

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Medical**

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.19****\$24,322.00****Santander Consumer USA**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 961245**Fort Worth****TX****76161**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Charge Off for \$35848 on 12/18

Last 4 digits of account number **1 0 0 0**When was the debt incurred? **05/2018**As of the date you file, the claim is ☐ Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Automobile - Repo'd

4.20**\$674.39****Southwest Credit**

Nonpriority Creditor's Name

4120 International Parkway

Number Street

Carrollton**TX****75007-1958**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **2 0 5 2**

When was the debt incurred? _____

As of the date you file, the claim is ☐ Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Unsecured

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.21****\$209.00****Synco/ at Home Plcc**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 965060**Orlando****FL****32896**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Account Closed By Grantor

Last 4 digits of account number 0 3 0 0**When was the debt incurred?** 08/2018**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Charge Account

4.22**\$146.00****Synchrony Bank/ Old Navy**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 965060**Orlando****FL****32896**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 4 3 3 5**When was the debt incurred?** 03/2018**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Charge Account

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.23****\$134.00****Synchrony Bank/TJX**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 965060**Orlando****FL****32896**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 6 5 8 2When was the debt incurred? 02/2017

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Charge Account

4.24**\$3,177.00****U.S. Department of Education**

Nonpriority Creditor's Name

ECMC/Bankruptcy

Number Street

PO Box 16408**Saint Paul****MN****55116**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Collection

Last 4 digits of account number 1 8 5 8When was the debt incurred? 05/2016

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Educational

STUDENT LOAN PERMANENTLY ASSIGNED TO GOVERNMENT

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.25****\$1,908.00****U.S. Department of Education**

Nonpriority Creditor's Name

ECMC/Bankruptcy

Number Street

PO Box 16408**Saint Paul****MN****55116**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Collection

Last 4 digits of account number 1 8 6 9**When was the debt incurred?** 05/2016**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Educational

4.26**\$3,529.00****Works And Lentz**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

1437 S Boulder, Suite 900**Tulsa****OK****74119**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Original Creditor Name: SAINT FRANCIS H

Last 4 digits of account number 5 6 6 9**When was the debt incurred?** 11/2017**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Medical Debt

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.27****\$180.00****Works and Lentz**

Nonpriority Creditor's Name

1437 S Boulder #900

Number

Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Tulsa**OK****74119**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Unsecured

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2.

For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified

Chris Knight

Name

5314 S. Yale Ave. Suite 150

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Tulsa

City

OK

State

74135

ZIP Code

Last 4 digits of account number _____

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | Total claim |
|--------------------------|--|---|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. <u>\$0.00</u> |
| | 6b. Taxes and certain other debts you owe the government | 6b. <u>\$0.00</u> |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. <u>\$0.00</u> |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here | 6d. + <u>\$0.00</u> |
| | 6e. Total. Add lines 6a through 6d. | 6d. <div style="border: 1px solid black; padding: 2px;"><u>\$0.00</u></div> |

| | | Total claim |
|--------------------------|---|--|
| Total claims from Part 2 | 6f. Student loans | 6f. <u>\$0.00</u> |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. <u>\$0.00</u> |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. <u>\$0.00</u> |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here | 6i. + <u>\$90,739.91</u> |
| | 6j. Total. Add lines 6f through 6i. | 6j. <div style="border: 1px solid black; padding: 2px;"><u>\$90,739.91</u></div> |

Fill in this information to identify your case:

| | | | |
|---|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaias First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases**12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.



Yes. Fill in all of the information below even if the contracts or leases are listed on property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease State what the contract or lease is for

Fill in this information to identify your case:

| | | | |
|---|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaias First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing
Official Form 106H**Schedule H: Your Codebtors****12/15**

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible.

If

two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)
☒ No
☐ Yes
2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
☐ No
☐ Yes
3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this information to identify your case:

| | | | |
|---|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaías First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number (if known) | | | |

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information

about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

| | Debtor 1 | Debtor 2 or non-filing spouse |
|---------------------------------|---|---|
| Employment status | <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed | <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed |
| Occupation | Burner | Sales Associate |
| Employer's name | Big Elk Energy Systems | Family Video |
| Employer's address | 4140 S. Galveston Ave Number Street | 12911 E 31st Street Number Street |
| | | |
| | | |
| | Tulsa OK 74107 City State Zip Code | Tulsa OK 74134 City State Zip Code |
| How long employed there? | 2 years | 3 years |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|--|---------------------|--|
| 2. List monthly gross wages, salary, and commissions (include all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | \$3,133.39 | \$950.49 |
| 3. Estimate and list monthly overtime pay. | \$0.00 | \$0.00 |
| 4. Calculate gross income Add line 2 + line 3. | \$3,133.39 | \$950.49 |

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---|---------------------|-----------------------------------|
| Copy line 4 here → 4. | \$3,133.39 | \$950.49 |
| 5. List all payroll deductions: | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. \$335.12 | \$72.71 |
| 5b. Mandatory contributions for retirement plans | 5b. \$0.00 | \$0.00 |
| 5c. Voluntary contributions for retirement plans | 5c. \$0.00 | \$0.00 |
| 5d. Required repayments of retirement fund loans | 5d. \$0.00 | \$0.00 |
| 5e. Insurance | 5e. \$166.66 | \$0.00 |
| 5f. Domestic support obligations | 5f. \$0.00 | \$0.00 |
| 5g. Union dues | 5g. \$0.00 | \$0.00 |
| 5h. Other deductions. Specify: <u>Garnishment</u> | 5h. \$288.30 | \$0.00 |
| 6. Add the payroll deductions Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. | \$790.08 | \$72.71 |
| 7. Calculate total monthly take-home pay Subtract line 6 from line 4. | \$2,343.31 | \$877.78 |
| 8. List all other income regularly received: | | |
| 8a. Net income from rental property and from operating a Attach a statement for each property and business showing gross receipts, ordinary and necessary business | 8a. \$0.00 | \$0.00 |
| 8b. Interest and dividends | 8b. \$0.00 | \$0.00 |
| 8c. Family support payments that you, a non-filing spouse, or a Include alimony, spousal support, child support, maintenance, | 8c. \$0.00 | \$0.00 |
| 8d. Unemployment compensation | 8d. \$0.00 | \$0.00 |
| 8e. Social Security | 8e. \$0.00 | \$0.00 |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance) Specify: _____ | 8f. \$0.00 | \$0.00 |
| 8g. Pension or retirement income | 8g. \$0.00 | \$0.00 |
| 8h. Other monthly income. Specify: _____ | 8h. \$0.00 | \$0.00 |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | \$0.00 | \$0.00 |
| 10. Calculate monthly income Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | \$2,343.31 | \$877.78 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Specify: _____ | \$0.00 | \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. | \$3,221.09 | \$3,221.09 |

Combined monthly income**13. Do you expect an increase or decrease within the year after you file this form?**☒ No.

None.

☐ Yes. Explain

Fill in this information to identify your case:

| | | | |
|---|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaias First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number (if known) | _____ | | |

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY**Official Form 106J****Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying

correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write

Part 1: Describe Your Household**1. Is this a joint case?**☐ No. Go to line 2.☒ Yes. **Does Debtor 2 live in a separate household?**☒ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.**2. Do you have dependents?** ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

| Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
|---|------------------------|--|
| <u>Son</u> | <u>22</u> | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes |
| _____ | _____ | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| _____ | _____ | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| _____ | _____ | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| _____ | _____ | <input type="checkbox"/> No <input type="checkbox"/> Yes |

3. Do your expenses include expenses of people other than yourself and your dependents?☒ No☐ Yes**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence.
Include first mortgage payments and any rent for the ground or lot.
If not included in line 4:

4. \$655.00

4a. Real estate taxes

4a. _____

4b. Property, homeowner's, or renter's insurance

4b. _____

4c. Home maintenance, repair, and upkeep expenses

4c. _____

4d. Homeowner's association or condominium dues

4d. _____

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Your expenses

| | | |
|--|------|-----------------|
| 5. Additional mortgage payments for your residence , as home equity loans | 5. | _____ |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$150.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$90.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$120.00 |
| 6d. Other. Specify: _____ | 6d. | _____ |
| 7. Food and housekeeping supplies | 7. | \$200.00 |
| 8. Childcare and children's education costs | 8. | _____ |
| 9. Clothing, laundry, and dry cleaning | 9. | \$50.00 |
| 10. Personal care products and services | 10. | \$50.00 |
| 11. Medical and dental expenses | 11. | _____ |
| 12. Transportation Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$200.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | _____ |
| 14. Charitable contributions and religious donations | 14. | _____ |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. | _____ |
| 15b. Health insurance | 15b. | _____ |
| 15c. Vehicle insurance | 15c. | \$230.00 |
| 15d. Other insurance. Specify: _____ | 15d. | _____ |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____ | 16. | _____ |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 12018 Chevrolet | 17a. | \$753.00 |
| 17b. Car payments for Vehicle 22010 Chevrolet | 17b. | \$380.00 |
| 17c. Other. Specify 2015 Nissan | 17c. | \$280.00 |
| 17d. Other. Specify: _____ | 17d. | _____ |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | _____ |
| 19. Other payments you make to support others who do not live with you. Specify: _____ | 19. | _____ |

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

| | |
|---|------------|
| 20a. Mortgages on other property | 20a. _____ |
| 20b. Real estate taxes | 20b. _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. _____ |
| 20d. Maintenance, repair, and upkeep expenses | 20d. _____ |
| 20e. Homeowner's association or condominium dues | 20e. _____ |

21. Other. Specify: _____ 21. **+** _____

22. Calculate your monthly expenses.

| | |
|---|-------------------------------|
| 22a. Add lines 4 through 21. | 22a. <u>\$3,158.00</u> |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. _____ |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | 22c. <u>\$3,158.00</u> |

23. Calculate your monthly net income.

| | |
|---|--|
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. <u>\$3,221.09</u> |
| 23b. Copy your monthly expenses from line 22c above. | 23b. - <u>\$3,158.00</u> |
| 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. <u>\$63.09</u> |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage

☒ No.

☐ Yes. Explain here:
None.

Fill in this information to identify your case:

| | | | |
|---------------------------------|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaias First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |

United States Bankruptcy Court for the **NORTHERN DISTRICT OF OKLAHOMA**

Case number (if known) _____

☐ Check if this is an amended filing
Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended

Part 1: Summarize Your Assets**Your assets**

Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)1a. Copy line 55, Total real estate, from Schedule A/B..... **\$129,839.00**1b. Copy line 62, Total personal property, from Schedule A/B..... **\$51,378.69**1c. Copy line 63, Total of all property on Schedule A/B..... **\$181,217.69****Part 2: Summarize Your Liabilities****Your liabilities**

Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$163,276.00****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$0.00**3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... **+** **\$90,739.91****Your total liabilities****\$254,015.91****Part 3: Summarize Your Income and Expenses****4. Schedule I: Your Income** (Official Form 106I)Copy your combined monthly income from line 12 of Schedule I..... **\$3,221.09****5. Schedule J: Your Expenses** (Official Form 106J)Copy your monthly expenses from line 22c of Schedule J..... **\$3,158.00**

Debtor 1

Isaias Morales Torres

Maria Ann Torres

Case number (if known)

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income, copy your total current monthly income from Official Form 122A-1 Line 10, OR, Form 122B Line 10, OR, Form 122C-1 Line 14.**\$4,474.69****9. Copy the following special categories of claims from Part 4, line 8, or Schedule E/F:****Total claim****From Part 4 or Schedule E/F, copy the following:**

- | | |
|--|---------------|
| 9a. Domestic support obligations. (Copy line 6a.) | \$0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 |
| 9d. Student loans. (Copy line 6f.) | \$0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + | \$0.00 |
| 9g. Total. Add lines 9a through 9f. | \$0.00 |

Fill in this information to identify your case:

| | | | |
|---------------------------------|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaias First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |

United States Bankruptcy Court for the **NORTHERN DISTRICT OF OKLAHOMA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are

X /s/ Isaias Morales Torres
Isaias Morales Torres, Debtor 1

Date **04/09/2019**
MM / DD / YYYY

X /s/ Maria Ann Torres
Maria Ann Torres, Debtor 2

Date **04/09/2019**
MM / DD / YYYY

Fill in this information to identify your case:

| | | | |
|---|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaias First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing
Official Form 107**Statement of Financial Affairs for Individuals Filing for Bankruptcy****04/19**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?
(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Codebtor* (Official Form 106H).

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
- ☒ Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | |
|---|--|---|--|---|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of the current year until | <input checked="" type="checkbox"/> Wages, commissions, | <u>\$10,417.25</u> | <input checked="" type="checkbox"/> Wages, commissions, | <u>\$2,694.24</u> |
| | <input type="checkbox"/> Operating a business | | <input type="checkbox"/> Operating a business | |
| For the last calendar year: | <input checked="" type="checkbox"/> Wages, commissions, | <u>\$42,664.00</u> | <input checked="" type="checkbox"/> Wages, commissions, | <u>\$9,156.25</u> |
| (January 1 to December <u>312018</u>) <div style="margin-left: 100px;">YYYY</div> | <input type="checkbox"/> Operating a business | | <input type="checkbox"/> Operating a business | |
| For the calendar year before that: | <input checked="" type="checkbox"/> Wages, commissions, | <u>\$18,177.00</u> | <input checked="" type="checkbox"/> Wages, commissions, | <u>\$12,056.77</u> |
| (January 1 to December <u>312017</u>) <div style="margin-left: 100px;">YYYY</div> | <input type="checkbox"/> Operating a business | | <input type="checkbox"/> Operating a business | |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security;

unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties;

and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debt* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic

- ☒ No

- ☐ Yes. List all payments to an insider.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No

- ☐ Yes. List all payments that benefited an insider.

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody

☐ No☒ Yes. Fill in the details.**Case title**

Torres v. Torres

Nature of the case

Divorce

Court or agency

Tulsa County Oklahoma

Status of the case☒ Pending☐ On appeal☐ Concluded

Court Name

500 S. Denver Ave

Number Street

Case number **FD-2019-310****Tulsa**

City

OK

State

74103

ZIP Code

Case title

Saber Acceptance v. Torres

Nature of the case

Indebtedness

Court or agency

Tulsa County Oklahoma

Status of the case☒ Pending☐ On appeal☐ Concluded

Court Name

500 S. Denver Ave

Number Street

Case number **CS-2018-8888****Tulsa**

City

OK

State

74103

ZIP Code

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☒ No. Go to line 11.☐ Yes. Fill in the information below.**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**☒ No☐ Yes. Fill in the details.**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of**☒ No☐ Yes

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 5: List Certain Gifts and Contributions**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**☒ No☐ Yes. Fill in the details for each gift.**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600**☒ No☐ Yes. Fill in the details for each gift or contribution.**Part 6: List Certain Losses****15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire,**☒ No☐ Yes. Fill in the details.**Part 7: List Certain Payments or Transfers****16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

☐ No☒ Yes. Fill in the details.**Law Office Of Charles Kania**

Person Who Was Paid

5319 South Lewis Ave Suite 120

Number Street

Tulsa, OK 74105

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

| Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|---|-----------------------------------|-------------------|
| | 03/25/2019 | \$1,015.00 |

| Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|---|-----------------------------------|-------------------|
| | | \$80.00 |

CIN Legal

Person Who Was Paid

Number Street

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

| Description and value of any property transferred | | Date payment or transfer was made | Amount of payment |
|---|--|-----------------------------------|-------------------|
| 001 Debtorcc, Inc. | | | |
| Person Who Was Paid | | | |
| Number Street | | | \$15.00 |
| City State ZIP Code | | | |
| Email or website address | | | |
| Person Who Made the Payment, if Not You | | | |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).

- ☒ No
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 **Isaias Morales Torres**
 Maria Ann Torres

Case number (if known) _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☒ No
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No
☐ Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☒ No
☐ Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental

☒ No
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

☒ No
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and

☒ No
☐ Yes. Fill in the details.

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include

- ☐ No
- ☐ Yes. Fill in the details below.

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years,

X /s/ Isaias Morales Torres _____
Isaias Morales Torres, Debtor 1
Date 04/09/2019

X /s/ Maria Ann Torres _____
Maria Ann Torres, Debtor 2
Date 04/09/2019

Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

- ☒ No
- ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person _____ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

| Fill in this information to identify your case: | | | |
|---|-----------------------------|-------------------------------|----------------------------|
| Debtor 1 | Isaias First Name | Morales Middle Name | Torres Last Name |
| Debtor 2 (Spouse, if filing) | Maria First Name | Ann Middle Name | Torres Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF OKLAHOMA | | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 3 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|---|---|
| Creditor's name: American Credit Accept | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Description of property securing debt: 2015 Nissan Versa (approx. 88,000 miles) VIN 3N1CE | | |
| Creditor's name: Conns | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Description of property securing debt: Misc. Furniture | | |
| Creditor's name: Conns | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Description of property securing debt: Household Furniture | | |

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Identify the creditor and the property that is collateral**What do you intend to do with the property that secures a debt?****Did you claim the property as exempt on Schedule C?**Creditor's name: **Conns**Description of property securing debt: **Household goods and furnishings.**

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☒ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]:

- ☐ No
- ☐ Yes

Creditor's name: **Ocwen Loan Servicing**Description of property securing debt: **4024 S. 132nd E Ave Tulsa, Oklahoma 74134**

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☒ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]:

- ☐ No
- ☐ Yes

Creditor's name: **Saber Acceptance**Description of property securing debt: **2010 Chevrolet Malibu (approx. 140,000 miles) VIN**

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☒ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]:

- ☐ No
- ☐ Yes

Creditor's name: **Santander Consumer USA**Description of property securing debt: **2018 Chevrolet Silverado (approx.**

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☒ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]:

- ☐ No
- ☐ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you list on **Schedule G: Executory Contracts and Unexpired Leases** (Official Form 106G), fill in the information below. Do not list real estate leases. ~~Unexpired leases~~ are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ Isaias Morales Torres

Isaias Morales Torres, Debtor 1

X /s/ Maria Ann Torres

Maria Ann Torres, Debtor 2

Date **04/09/2019**

MM / DD / YYYY

Date **04/09/2019**

MM / DD / YYYY

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLAHOMA
TULSA DIVISION**

In re **Isaias Morales Torres**
Maria Ann Torres

Case No. _____

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|--|-------------------|
| For legal services, I have agreed to accept..... | \$1,015.00 |
| Prior to the filing of this statement I have received..... | \$1,015.00 |
| Balance Due..... | \$0.00 |

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

Exemption planning; preparation and filing of reaffirmation agreements and applications as needed; meeting of creditors. In addition to portion of fee paid as stated herein, the court's filing fee and a credit report fee for each party has been paid by client(s). Also, debtor have been advised they have no legal obligation to pay any outstanding attorney fees owing at time of bankruptcy filing and that payments post-petition are strictly voluntary. Client may use the services of 722redemption.com to providing funding for redemptions of vehicles; debtor will borrow \$700 from 722redemption.com to pay attorney fees for attorney fees to obtain redemption.

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/09/2019

Date

/s/ Charles J. Kania

Charles J. Kania

Charles J. Kania & Associates, P.C.

5319 South Lewis

Suite 120

Tulsa, OK 74105

Charles@kanialaw.com

Bar No. 20512

/s/ Isaias Morales Torres

Isaias Morales Torres

/s/ Maria Ann Torres

Maria Ann Torres

Revised 02/2012

IN THE UNITED STATES BANKRUPTCY COURT

IN RE:

Isaias Morales Torres
Maria Ann Torres

DEBTOR(S)

§
§ Case No. :
§
§ Chapter: 7
§
§

VERIFICATION AS TO OFFICIAL CREDITOR LIST

- ☒ Original
☐ Amendment
☐ Add ☐ Delete

I hereby certify under penalty of perjury that the master mailing list of creditors submitted either on application, or uploaded to the Electronic Case Filing System is a true, correct and complete listing to the best of my knowledge.

I further acknowledge that (1) the accuracy and completeness in preparing the creditor listing are the shared responsibility of the debtor and the debtor's attorney, (2) the court will rely on the creditor listing for all mailings, and (3) that the various schedules and statements required by the Bankruptcy Rules are not used for mailing purposes.

If this filing is an amendment to the creditor list, indicate only the number of creditors being added or to be deleted at this time. (For verification purposes, attach a list of the creditors being submitted, uploaded, or to be deleted.)

31 # of Creditors (or if amended, # of creditors added)

Method of submission:

- a) ☒ uploaded to Electronic Case Filing System; or
b) ☐ Creditor List Submission application (to be used by Pro Se filers, found on the Court's

website at www.oknb.uscourts.gov, or available in the Clerk's Office)

 # of Creditors (on attached list) to be deleted

/s/ Isaias Morales Torres
Debtor Signature Isaias Morales Torres

/s/ Maria Ann Torres
Joint Debtor Signature Maria Ann Torres

/s/ Charles J. Kania Counsel Debtors
Charles J. Kania, OBA #20512
5319 S. Lewis Ave., Suite 120
Tulsa, OK 74105
Telephone: (918) 743-2239
Facsimile: (918) 743-2244
charles@kanialaw.com

Date: April 9, 2019

[Check if applicable]

 Creditor(s) with foreign addresses included

American Credit Accept
961 E Main St
Spartanburg, SC 29302

Cap1/Justice
Capital One Retail Srvs/Attn: Bankruptcy
PO Box 30258
Salt Lake City, UT 84130

Capital One
Attn: Bankruptcy
PO Box 30285
Salt Lake City, UT 84130

Chris Knight
5314 S. Yale Ave. Suite 150
Tulsa, Oklahoma 74135

Comenity Bank/Victoria Secret
Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

Comenitycapital/fFe21
Attn: Bankruptcy Dept
PO Box 182125
Columbus, OH 43218

Conns
Attn: Bankruptcy Department
PO Box 815867
Dallas, TX 75234

Convergent Outsourcing, Inc.
Attn: Bankruptcy
PO Box 9004
Renton, WA 98057

Deville Mgmt
Attn: Bankruptcy
PO Box 1987
Colleyville, TX 76034

Ditech
Attn: Bankruptcy
PO Box 6172
Rapid City, SD 57709

Escallate, LLC
PO Box 645425
Cincinnati, OH 45264

First National Collection Bureau, Inc.
610 Waltham Way
Sparks, NV 89434

GC Services Limited Partnership
PO Box 1022
Wixom, MI 48393

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
PO Box 802501
Cincinnati, OH 45280

MARS
PO Box 170910
Tulsa, OK 74147

Midland Funding
2365 Northside Dr Ste 300
San Diego, CA 92108

Ocwen Loan Servicing
Attn: Research/Bankruptcy
1661 Worthington Rd Ste 100
West Palm Beach, FL 33409

Oklahoma Tax Commission
P.O. Box 26930
Oklahoma City, OK 73126

Progressive Leasing
256 Data Dr.
Draper, UT 84020

Radiology Consultants of Tulsa
P.O. Box 4975
Tulsa, OK 74159

Saber Acceptance
Attn: Bankruptcy Department
PO Box 471823
Tulsa, OK 74147

Saint Francis Health System
6600 S. Yale Ave.
Suite 1400
Tulsa, OK 74136

Santander Consumer USA
Attn: Bankruptcy
PO Box 961245
Fort Worth, TX 76161

Southwest Credit
4120 International Parkway
Carrollton, TX 75007-1958

Synco/at Home Plcc
Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896

Synchrony Bank/ Old Navy
Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896

Synchrony Bank/TJX
Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896

U.S. Department of Education
ECMC/Bankruptcy
PO Box 16408
Saint Paul, MN 55116

Works And Lentz
Attn: Bankruptcy
1437 S Boulder, Suite 900
Tulsa, OK 74119

Works and Lentz
1437 S Boulder #900
Tulsa, OK 74119

Fill in this information to identify your case:

Debtor 1 **Isaias** **Morales** **Torres**
First Name Middle Name Last Name

Debtor 2 **Maria** **Ann** **Torres**
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the **NORTHERN DISTRICT OF OKLAHOMA**

Case number _____
 (if known)

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under
- ☐ 3. The Means Test does not apply now because of qualified military service but it could

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income**1. What is your marital and filing status?** Check one only.

- ☐ **Not married** Fill out Column A, lines 2-11.
- ☒ **Married and your spouse is filing with you** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental

| | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
|---|----------------------|--|
| 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). | <u>\$3,511.96</u> | <u>\$962.73</u> |
| 3. Alimony and maintenance payments Do not include payments from a spouse if Column B is filled in. | <u>\$0.00</u> | <u>\$0.00</u> |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from | <u>\$0.00</u> | <u>\$0.00</u> |

Debtor 1 **Isaias Morales Torres**
Maria Ann Torres

Case number (if known) _____

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

5. Net income from operating a business, profession, or farm

| | Debtor 1 | Debtor 2 | | |
|---|----------|----------|-------------|--------------------|
| Gross receipts (before all deductions) | \$0.00 | \$0.00 | | |
| Ordinary and necessary operating expenses | \$0.00 | - | \$0.00 | |
| Net monthly income from a business, profession, or farm | \$0.00 | \$0.00 | Copy here → | \$0.00 \$0.00 |

6. Net income from rental and other real property

| | Debtor 1 | Debtor 2 | | |
|---|----------|----------|-------------|--------------------|
| Gross receipts (before all deductions) | \$0.00 | \$0.00 | | |
| Ordinary and necessary operating expenses | \$0.00 | - | \$0.00 | |
| Net monthly income from rental or other real property | \$0.00 | \$0.00 | Copy here → | \$0.00 \$0.00 |

7. Interest, dividends, and royalties

\$0.00 \$0.00

8. Unemployment compensation

\$0.00 \$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:↓

For you..... \$0.00

For your spouse..... \$0.00

9. Pension or retirement income Do not include any amount received that was a benefit under the Social Security Act.

\$0.00 \$0.00

10. Income from all other sources not listed above Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity,

Total amounts from separate pages, if any.

+ +

11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

| | | | | |
|------------|---|----------|---|-------------------|
| \$3,511.96 | + | \$962.73 | = | \$4,474.69 |
|------------|---|----------|---|-------------------|

**Total current
monthly income**

Debtor 1 **Isaias Morales Torres****Maria Ann Torres**

Case number (if known) _____

Part 2: Determine Whether the Means Test Applies to You**12. Calculate your current monthly income for the year.** Follow these steps:12a. Copy your total current monthly income from line 11.....**Copy line 11 here →** 12a. **\$4,474.69**

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form.

12b. **\$53,696.28****13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

Oklahoma

Fill in the number of people in your household.

3

Fill in the median family income for your state and size of household..... 13.

\$63,417.00

To find a list of applicable median income amounts, go online using the link specified in the separate

14. How do the lines compare?14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check **There is no presumption of abuse.**
Go to Part 3.14b. ☐ Line 12b is more than line 13. On the top of page 1, check **The presumption of abuse is determined by Form 122A-2.**
Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Isaias Morales Torres

Isaias Morales Torres, Debtor 1

X /s/ Maria Ann Torres

Maria Ann Torres, Debtor 2

Date **4/9/2019**

MM / DD / YYYY

Date **4/9/2019**

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLAHOMA**

IN RE:

Isaias Morales Torres
Maria Ann Torres

DEBTOR(S)

§
§ Case No. :
§
§ Chapter: 7
§
§

SUBMISSION OF CERTIFICATE OF CREDIT COUNSELING

COMES NOW the Debtor, Isaias Morales Torres, by and through attorney, Charles J, Kania of the **KANIA LAW OFFICE**, and respectfully submits to the Court the following:

1. Isaias Morales Torres's Certificate of Credit Counseling.

WHEREFORE, Debtor prays that the Court attach this certificate to the filed Bankruptcy case.

Respectfully submitted,

KANIA LAW OFFICE

/s/ Charles J. Kania
Charles J. Kania, OBA #20512
5319 S. Lewis Ave., Suite 120
Tulsa, OK 74105
Telephone: (918) 743-2239
Facsimile: (918) 743-2244
charles@kanialaw.com

Certificate Number: 15725-OKN-CC-032481703



15725-OKN-CC-032481703

CERTIFICATE OF COUNSELING

I CERTIFY that on March 21, 2019, at 6:31 o'clock PM EDT, Isaias Torres received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Oklahoma, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 21, 2019 By: /s/Alexis Preza-Alva

Name: Alexis Preza-Alva

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLAHOMA**

IN RE:

Isaias Morales Torres
Maria Ann Torres

DEBTOR(S)

§
§ Case No. :
§
§ Chapter: 7
§
§

SUBMISSION OF CERTIFICATE OF CREDIT COUNSELING

COMES NOW the Joint Debtor, Maria Ann Torres, by and through her attorney, Charles J, Kania of the **KANIA LAW OFFICE**, and respectfully submits to the Court the following:

1. Maria Ann Torres's Certificate of Credit Counseling.

WHEREFORE, Debtor prays that the Court attach this certificate to the filed Bankruptcy case.

Respectfully submitted,

KANIA LAW OFFICE

/s/ Charles J. Kania
Charles J. Kania, OBA #20512
5319 S. Lewis Ave., Suite 120
Tulsa, OK 74105
Telephone: (918) 743-2239
Facsimile: (918) 743-2244
charles@kanialaw.com

Certificate Number: 15725-OKN-CC-032481704



15725-OKN-CC-032481704

CERTIFICATE OF COUNSELING

I CERTIFY that on March 21, 2019, at 6:31 o'clock PM EDT, Maria Torres received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Oklahoma, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 21, 2019 By: /s/Alexis Preza-Alva

Name: Alexis Preza-Alva

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

FORM 1007-1F (10/07)

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLAHOMA**

IN RE:

Isaias Morales Torres
Maria Ann Torres

§
§ Case No. :
§
§ Chapter: 7
§
§

DEBTOR(S)**PAYMENT ADVICES CERTIFICATION***(NOTE: A separate form must be filed by each debtor in a joint case)*

Pursuant to 11 U.S.C. § 521(a)(1)(B)(iv), a debtor shall file copies of *all* payment advices or other evidence of payment (such as paycheck stubs, direct deposit statements, employer's statement of hours and earnings) received from the debtor's employer *within 60 days* before the date the debtor filed his/her bankruptcy case (the "petition date").*

I, Isaias Morales Torres hereby states as follows (*select one*) :

- ☒ I have attached hereto, or previously filed with the Court, copies of all payment advices or other evidence of payment received from my employer(s) within 60 days before the petition date.

Number of Employers: 1 Number of Payment Advices received: 4
Number of Payment Advices attached: 4
Period Covered: 2-9-2019 4-9-2019

(If period covered is less than 60 days, attach an explanation.)

If the attached payment advices do not cover the entire 60-day period, describe any "other evidence of payment" that you intend to rely upon _____.

- ☐ I received payment advices from an employer(s) during the 60 days before the petition date but have not yet located or obtained copies of all of the payment advices. I understand that if I do not file all payment advices or other evidence of payment **within 45 days** from the petition date, my bankruptcy case may be **dismissed**.

Number of Employers: _____ Number of Payment Advices attached: _____
Period Covered: _____
Number of missing Payment Advices: _____
Dates of missing Payment Advices: _____

- ☐ I did not receive any payment advices or other evidence of payment from any employer at any point during the 60 days before the petition date. *(If you were employed, attach an explanation of why you did not receive any payment advices from your employer.)*

I declare under penalty of perjury that the foregoing statement is true and correct to the best of my knowledge, information and belief.

Date: April 9, 2019

_____/s/ Isaias Morales Torres_____
Print name: Isaias Morales Torres

** In order to protect the debtor's privacy, all but the last four digits of the Debtor's social security number and financial account number should be redacted from any payment advice. References to dates of birth should contain only the year and names of any minors should be redacted or include only initials.*

Respectfully submitted,

KANIA LAW OFFICE

/s/ Charles J. Kania

Charles J. Kania, OBA #20512

5319 S. Lewis Ave., Suite 120

Tulsa, OK 74105

Telephone: (918) 743-2239

Facsimile: (918) 743-2244

charles@kanialaw.com

Enc.

CO. FILE DEPT. CK VCHR. NO. 062
W09 000214 WELDNG 0000130074 1

BIG ELK ENERGY SYSTEMS LLC
4140 S. GALVESTON AVE
TULSA, OK 74107

Earnings Statement



Period Beginning: 03/11/2019
Period Ending: 03/24/2019
Pay Date: 03/29/2019

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 4
OK: 4, Filing Jointly or Surviving Spouse

ISAIAS MORALES TORRES
4023 S 132ND E AVE
TULSA OK 74134

| Earnings | rate | hours | this period | year to date |
|------------------|---------|-------|-------------------|------------------|
| Regular | 19.0600 | 67.10 | 1,278.93 | 7,316.19 |
| Overtime | 28.5900 | 5.85 | 167.25 | 223.00 |
| Holiday | | | | 762.40 |
| Sick | | | | 1,334.20 |
| Vacation | | | | 781.46 |
| Gross Pay | | | \$1,446.18 | 10,417.25 |

Your federal taxable wages this period are
\$1,369.26

Other Benefits and Information

| | this period | total to date |
|--------------|-------------|---------------|
| Vacation Bal | 39.00 | |
| Sick Hrs | | 70.00 |
| Vacation Hrs | | 41.00 |

| Deductions | Statutory | | |
|---------------------|-------------------|----------|--|
| Federal Income Tax | -26.93 | 120.07 | |
| Social Security Tax | -84.89 | 551.81 | |
| Medicare Tax | -19.85 | 129.05 | |
| OK State Income Tax | -23.00 | 125.00 | |
| Other | | | |
| Fsa | -76.92* | 538.44 | |
| Garnishment | -133.06 | 2,183.02 | |
| Cancer | | 99.60 | |
| Dental | | 164.76 | |
| Health | | 701.40 | |
| Vsp | | 12.84 | |
| Net Pay | \$1,081.53 | | |
| Checking 1 | -1,081.53 | | |
| Net Check | \$0.00 | | |

* Excluded from federal taxable wages

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BIG ELK ENERGY SYSTEMS LLC
4140 S. GALVESTON AVE
TULSA, OK 74107

Advice number: 00000130074
Pay date: 03/29/2019

| Deposited to the account of | account number | transit | ABA | amount |
|-----------------------------|----------------|---------|------|------------|
| ISAIAS MORALES TORRES | XXXXXXXXXX1151 | XXXX | XXXX | \$1,081.53 |

THIS IS NOT A CHECK

NON-NEGOTIABLE

CO. FILE DEPT. C VCHR. NO. 062
W09 000214 WELDNG 0000110075 1

BIG ELK ENERGY SYSTEMS LLC
4140 S. GALVESTON AVE
TULSA, OK 74107

Earnings Statement



Period Beginning: 02/25/2019
Period Ending: 03/10/2019
Pay Date: 03/15/2019

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 4
OK: 4, Filing Jointly or Surviving Spouse

ISAIAS MORALES TORRES
4023 S 132ND E AVE
TULSA OK 74134

| Earnings | rate | hours | this period | year to date |
|------------------|---------|-------|-------------------|--------------|
| Regular | 19.0600 | 72.70 | 1,385.66 | 6,037.26 |
| Overtime | | | | 55.75 |
| Holiday | | | | 762.40 |
| Sick | | | | 1,334.20 |
| Vacation | | | | 781.46 |
| Gross Pay | | | \$1,385.66 | 8,971.07 |

Your federal taxable wages this period are
\$1,145.64

Other Benefits and Information

| | this period | total to date |
|--------------|-------------|---------------|
| Vacation Bal | 39.00 | |
| Sick Hrs | | 70.00 |
| Vacation Hrs | | 41.00 |

| Deductions | Statutory | | |
|------------|---------------------|-----------------|----------|
| | Federal Income Tax | -4.57 | 93.14 |
| | Social Security Tax | -71.03 | 466.92 |
| | Medicare Tax | -16.61 | 109.20 |
| | OK State Income Tax | -12.00 | 102.00 |
| | Other | | |
| | Cancer | -16.60* | 99.60 |
| | Dental | -27.46* | 164.76 |
| | Fsa | -76.92* | 461.52 |
| | Garnishment | -320.36 | 2,049.96 |
| | Health | -116.90* | 701.40 |
| | Vsp | -2.14* | 12.84 |
| | Net Pay | \$721.07 | |
| | Checking 1 | -721.07 | |
| | Net Check | \$0.00 | |

* Excluded from federal taxable wages

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BIG ELK ENERGY SYSTEMS LLC
4140 S. GALVESTON AVE
TULSA, OK 74107

Advice number: 00000110075
Pay date: 03/15/2019

| Deposited to the account of | account number | transit ABA | amount |
|-----------------------------|----------------|-------------|----------|
| ISAIAS MORALES TORRES | XXXXXXXX1151 | XXXX XXXX | \$721.07 |

THIS IS NOT A CHECK

NON-NEGOTIABLE

CO. FILE DEPT. CL VCHR. NO. 062
W09 000214 WELDNG 0000090075 1

BIG ELK ENERGY SYSTEMS LLC
4140 S. GALVESTON AVE
TULSA, OK 74107

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 4
OK: 4, Filing Jointly or Surviving Spouse

Earnings Statement



Period Beginning: 02/11/2019
Period Ending: 02/24/2019
Pay Date: 03/01/2019

ISAIAS MORALES TORRES
4023 S 132ND E AVE
TULSA OK 74134

| Earnings | rate | hours | this period | year to date |
|------------------|---------|-------|-------------------|--------------|
| Regular | 19.0600 | 53.95 | 1,028.29 | 4,651.60 |
| Sick | 19.0600 | 10.00 | 190.60 | 1,334.20 |
| Vacation | 19.0600 | 17.00 | 324.02 | 781.46 |
| Overtime | | | | 55.75 |
| Holiday | | | | 762.40 |
| Gross Pay | | | \$1,542.91 | 7,585.41 |

Your federal taxable wages this period are
\$1,302.89

Other Benefits and Information

| | this period | total to date |
|--------------|-------------|---------------|
| Vacation Bal | 39.00 | |
| Sick Hrs | | 70.00 |
| Vacation Hrs | | 41.00 |

| Deductions | Statutory | | |
|------------|---------------------|-----------------|----------|
| | Federal Income Tax | -20.30 | 88.57 |
| | Social Security Tax | -80.78 | 395.89 |
| | Medicare Tax | -18.89 | 92.59 |
| | OK State Income Tax | -19.00 | 90.00 |
| | Other | | |
| | Cancer | -16.60* | 83.00 |
| | Dental | -27.46* | 137.30 |
| | Fsa | -76.92* | 384.60 |
| | Garnishment | -350.99 | 1,729.60 |
| | Health | -116.90* | 584.50 |
| | Vsp | -2.14* | 10.70 |
| | Net Pay | \$812.93 | |
| | Checking 1 | -812.93 | |
| | Net Check | \$0.00 | |

* Excluded from federal taxable wages

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BIG ELK ENERGY SYSTEMS LLC
4140 S. GALVESTON AVE
TULSA, OK 74107

Advice number: 0000090075
Pay date: 03/01/2019

| | | | |
|-----------------------------|----------------|-------------|----------|
| Deposited to the account of | account number | transit ABA | amount |
| ISAIAS MORALES TORRES | xxxxxxxx1151 | xxxx xxxx | \$812.93 |

THIS IS NOT A CHECK

NON-NEGOTIABLE

CO. FILE DEPT. C VCHR. NO. 062
W09 000214 WELDNG 0000070075 1

BIG ELK ENERGY SYSTEMS LLC
4140 S. GALVESTON AVE
TULSA, OK 74107

Earnings Statement



Period Beginning: 01/28/2019
Period Ending: 02/10/2019
Pay Date: 02/15/2019

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 4
OK: 4, Filing Jointly or Surviving Spouse

ISAIAS MORALES TORRES
4023 S 132ND E AVE
TULSA OK 74134

| Earnings | rate | hours | this period | year to date |
|------------------|---------|-------|-------------------|--------------|
| Regular | 19.0600 | 39.80 | 758.59 | 3,623.31 |
| Sick | 19.0600 | 20.00 | 381.20 | 1,143.60 |
| Vacation | 19.0600 | 20.00 | 381.20 | 457.44 |
| Overtime | | | | 55.75 |
| Holiday | | | | 762.40 |
| Gross Pay | | | \$1,520.99 | 6,042.50 |

Your federal taxable wages this period are
\$1,280.97

Other Benefits and

| Information | this period | total to date |
|--------------|-------------|---------------|
| Vacation Bal | 56.00 | |
| Sick Hrs | | 60.00 |
| Vacation Hrs | | 24.00 |

| Deductions | Statutory | | |
|------------|---------------------|-----------------|----------|
| | Federal Income Tax | -18.11 | 68.27 |
| | Social Security Tax | -79.42 | 315.11 |
| | Medicare Tax | -18.58 | 73.70 |
| | OK State Income Tax | -18.00 | 71.00 |
| | Other | | |
| | Cancer | -16.60* | 66.40 |
| | Dental | -27.46* | 109.84 |
| | Fsa | -76.92* | 307.68 |
| | Garnishment | -346.72 | 1,378.61 |
| | Health | -116.90* | 467.60 |
| | Vsp | -2.14* | 8.56 |
| | Net Pay | \$800.14 | |
| | Checking 1 | -800.14 | |
| | Net Check | \$0.00 | |

* Excluded from federal taxable wages

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BIG ELK ENERGY SYSTEMS LLC
4140 S. GALVESTON AVE
TULSA, OK 74107

Advice number: 00000070075
Pay date: 02/15/2019

| | | | |
|-----------------------------|----------------|-------------|----------|
| Deposited to the account of | account number | transit ABA | amount |
| ISAIAS MORALES TORRES | xxxxxxxx1151 | xxxx xxxx | \$800.14 |

THIS IS NOT A CHECK

NON-NEGOTIABLE

FORM 1007-1F (10/07)

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLAHOMA**

IN RE:

Isaias Morales Torres
Maria Ann Torres

§
§ Case No. :
§
§ Chapter: 7
§
DEBTOR(S) §

PAYMENT ADVICES CERTIFICATION

*(NOTE: A separate form must be filed by **each** debtor in a joint case)*

Pursuant to 11 U.S.C. § 521(a)(1)(B)(iv), a debtor shall file copies of *all* payment advices or other evidence of payment (such as paycheck stubs, direct deposit statements, employer's statement of hours and earnings) received from the debtor's employer *within 60 days* before the date the debtor filed his/her bankruptcy case (the "petition date").*

I, Maria Ann Torres hereby states as follows (*select one*) :

- ☒ I have attached hereto, or previously filed with the Court, copies of all payment advices or other evidence of payment received from my employer(s) within 60 days before the petition date.

Number of Employers: 1 Number of Payment Advices received: 4
Number of Payment Advices attached: 4
Period Covered: 2-9-2019 4-9-2019

(If period covered is less than 60 days, attach an explanation.)

If the attached payment advices do not cover the entire 60-day period, describe any "other evidence of payment" that you intend to rely upon _____.

- ☐ I received payment advices from an employer(s) during the 60 days before the petition date but have not yet located or obtained copies of all of the payment advices. I understand that if I do not file all payment advices or other evidence of payment **within 45 days** from the petition date, my bankruptcy case may be **dismissed**.

Number of Employers: _____ Number of Payment Advices attached: _____
Period Covered: _____
Number of missing Payment Advices: _____
Dates of missing Payment Advices: _____

- ☐ I did not receive any payment advices or other evidence of payment from any employer at any point during the 60 days before the petition date. *(If you were employed, attach an explanation of why you did not receive any payment advices from your employer.)*

I declare under penalty of perjury that the foregoing statement is true and correct to the best of my knowledge, information and belief.

Date: April 9, 2019

_____/s/____ Maria Ann Torres____
Print name: Maria Ann Torres

** In order to protect the debtor's privacy, all but the last four digits of the Debtor's social security number and financial account number should be redacted from any payment advice. References to dates of birth should contain only the year and names of any minors should be redacted or include only initials.*

Respectfully submitted,

KANIA LAW OFFICE

/s/ Charles J. Kania
Charles J. Kania, OBA #20512
5319 S. Lewis Ave., Suite 120
Tulsa, OK 74105
Telephone: (918) 743-2239
Facsimile: (918) 743-2244
charles@kanialaw.com

| | | | | | |
|-----|--------|--------|---|------------|-----|
| CO. | FILE | DEPT. | K | VCHR. NO. | 060 |
| VDU | 182281 | 00562D | | 0000132345 | 1 |

familyVideo

 2500 LEHIGH AVE
 GLENVIEW, IL 60025

 Taxable Marital Status: Married
 Exemptions/Allowances:
 Federal: 6
 OK: 6, Filing Jointly or Surviving Spouse

Earnings Statement

 Period Beginning: 03/17/2019
 Period Ending: 03/24/2019
 Pay Date: 04/02/2019

MARIA A TORRES
4024 S 132ND E AVE
TULSA OK 74134

| Earnings | rate | hours | this period | year to date |
|------------------|--------|-------|-----------------|--------------|
| Regular | 8.8500 | 15.22 | 134.70 | 2,489.78 |
| Commission | | | | 126.40 |
| Holiday Worked | | | | 57.09 |
| Training | | | | 20.97 |
| Gross Pay | | | \$134.70 | 2,694.24 |

Important Notes

YOUR COMPANY PHONE NUMBER IS :- 847-904-9060

| Deductions | Statutory | | |
|------------|---------------------|-----------------|----------|
| | Social Security Tax | -8.35 | 167.04 |
| | Medicare Tax | -1.96 | 39.07 |
| | Other | | |
| | Misc. Deduction | | 7.10 |
| | Net Pay | \$124.39 | |
| | Checking 2 | -124.39 | 2,481.03 |
| | Net Check | \$0.00 | |

Your federal taxable wages this period are \$134.70

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familyVideo

 2500 LEHIGH AVE
 GLENVIEW, IL 60025

 Advice number: 00000132345
 Pay date: 04/02/2019

 Deposited to the account of
 MARIA A TORRES

| account number | transit ABA | amount |
|----------------|-------------|----------|
| | | \$124.39 |

THIS IS NOT A CHECK

NON-NEGOTIABLE

CO. FILE DEPT. K VCHR. NO. 060
VDU 182281 00562D 0000122504 1

familyVideo

2500 LEHIGH AVE
GLENVIEW, IL 60025

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 6
OK: 6, Filing Jointly or Surviving Spouse

Earnings Statement



Period Beginning: 03/03/2019
Period Ending: 03/16/2019
Pay Date: 03/26/2019

MARIA A TORRES
4024 S 132ND E AVE
TULSA OK 74134

| Earnings | rate | hours | this period | year to date |
|------------------|--------|-------|-----------------|--------------|
| Regular | 8.8500 | 49.57 | 438.69 | 2,355.08 |
| Commission | | | | 126.40 |
| Holiday Worked | | | | 57.09 |
| Training | | | | 20.97 |
| Gross Pay | | | \$438.69 | 2,559.54 |

Important Notes

YOUR COMPANY PHONE NUMBER IS :- 847-904-9060

| Deductions | Statutory | | |
|---------------------|-----------------|----------|--|
| Social Security Tax | -27.20 | 158.69 | |
| Medicare Tax | -6.36 | 37.11 | |
| Other | | | |
| Misc. Deduction | | 7.10 | |
| Net Pay | \$405.13 | | |
| Checking 2 | -405.13 | 2,356.64 | |
| Net Check | \$0.00 | | |

Your federal taxable wages this period are \$438.69

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2500 LEHIGH AVE
GLENVIEW, IL 60025

Advice number: 00000122504
Pay date: 03/26/2019

Deposited to the account of
MARIA A TORRES

| account number | transit | ABA | amount |
|----------------|---------|-----|----------|
| | | | \$405.13 |

THIS IS NOT A CHECK

NON-NEGOTIABLE

CO. FILE DEPT. K VCHR. NO. 060
VDU 182281 00562D 0000102941 1



2500 LEHIGH AVE
GLENVIEW, IL 60025

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 6
OK: 6, Filing Jointly or Surviving Spouse

Earnings Statement



Period Beginning: 02/17/2019
Period Ending: 03/02/2019
Pay Date: 03/12/2019

MARIA A TORRES
4024 S 132ND E AVE
TULSA OK 74134

| Earnings | rate | hours | this period | year to date |
|------------------|--------|-------|-----------------|--------------|
| Regular | 8.8500 | 48.44 | 428.69 | 1,916.39 |
| Commission | | | 26.95 | 126.40 |
| Holiday Worked | | | | 57.09 |
| Training | | | | 20.97 |
| Gross Pay | | | \$455.64 | 2,120.85 |

Important Notes

YOUR COMPANY PHONE NUMBER IS :- 847-904-9060

| Deductions | Statutory | | |
|------------|---------------------|-----------------|----------|
| | Social Security Tax | -28.25 | 131.49 |
| | Medicare Tax | -6.60 | 30.75 |
| | Other | | |
| | Misc. Deduction | -7.10 | 7.10 |
| | Net Pay | \$413.69 | |
| | Checking 2 | -413.69 | 1,951.51 |
| | Net Check | \$0.00 | |

Your federal taxable wages this period are \$455.64

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2500 LEHIGH AVE
GLENVIEW, IL 60025

Advice number: 00000102941
Pay date: 03/12/2019

Deposited to the account of
MARIA A TORRES

| account number | transit | ABA | amount |
|----------------|---------|-----|----------|
| [REDACTED] | | | \$413.69 |

THIS IS NOT A CHECK

NON-NEGOTIABLE

CO. FILE DEPT. K VCHR. NO. 060
VDU 182281 00562D 0000082581 1



2500 LEHIGH AVE
GLENVIEW, IL 60025

Taxable Marital Status: Married
Exemptions/Allowances:
Federal: 6
OK: 6, Filing Jointly or Surviving Spouse

Earnings Statement



Period Beginning: 02/03/2019
Period Ending: 02/16/2019
Pay Date: 02/26/2019

MARIA A TORRES
4024 S 132ND E AVE
TULSA OK 74134

| Earnings | rate | hours | this period | year to date |
|---------------------|--------|-------|-----------------|--------------|
| Regular | 8.8500 | 36.80 | 325.68 | 1,487.70 |
| Commission | | | | 99.45 |
| Holiday Worked | | | | 57.09 |
| Training | | | | 20.97 |
| Gross Pay | | | \$325.68 | 1,665.21 |
| Deductions | | | | |
| Statutory | | | | |
| Social Security Tax | | | -20.19 | 103.24 |
| Medicare Tax | | | -4.73 | 24.15 |
| Net Pay | | | \$300.76 | |
| Checking 2 | | | -300.76 | 1,537.82 |
| Net Check | | | \$0.00 | |

Important Notes

YOUR COMPANY PHONE NUMBER IS :- 847-904-9060

Your federal taxable wages this period are \$325.68

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2500 LEHIGH AVE
GLENVIEW, IL 60025

Advice number: 0000082581
Pay date: 02/26/2019

Deposited to the account of
MARIA A TORRES

| account | number | transit | ABA | amount |
|---------|--------|---------|-----|----------|
| | | | | \$300.76 |

THIS IS NOT A CHECK

NON-NEGOTIABLE